STATE OF SOUTH DAKOTA

Statement of Legal Newspaper Ownership and Circulation

Return to: Secretary of State, 500 E. Capitol, Pierre, SD 57501-5077		
1. TITLE OF NEWSPAPER Tri-City Sto	r	2. DATE 9/29/14
3. FREQUENCY OF ISSUE 3A. NO. OF ISSUES PUBLIS	77777	NUAL SUBSCRIPTION
Weekly 51/no christin	ו בשול בשו	\$ 49.98 50.90
4. COMPLETE MAILING ADDRESS OF KNOWN OFFICE OF PUBLICATION (Street, City, County, State and ZIP+4 Code)		
(Not printers) 306 W. 4th St., White SD 57276		
5. COMPLETE MAILING ADDRESS OF THE HEADQUARTERS OR GENERAL BUSINESS OFFICES OF THE		
PUBLISHER (Not printers) POB18 207 Kasan Av. Volga SD 57071-0018		
6. FULL NAME OF PUBLISHER: LINDO R. Schumacher		
7. OWNER (If owned by a corporation, its name and address must be stated and list on the back of this form the names and		
addresses of stockholders owning or holding 1 percent or more of total amount of stock. If not owned by a corporation, the		
names and addresses of the individual owners must be given. If owned by a partnership or other unincorporated firm, its name		
and address, as well as that of each individual must be given. FILL NAME COMPLETE MAILING ADDRESS		
1 OLL IVIEW		
RFD News Group Inc. 207 Kasan Av. Volga SD 5707 8. KNOWN BONDHOLDERS, MORTGAGES, AND OTHER SECURITY HOLDERS OWNING OR HOLDING 1		
8. KNOWN BONDHOLDERS, MORTGAGES, AND OTHER SECURITY HOLDERS OWNING OR HOLDING 1		
PERCENT OR MORE OF TOTAL AMOUNT OF BONDS, MORTGAGES OR OTHER SECURITIES (If there are none, so		
state. If more space is needed, list on back of this form.		
None		
	AVERAGE NO. COPIES	ACTUAL NO. COPIES
9. EXTENT AND NATURE OF CIRCULATION	EACH ISSUED PRECEDING 12	ISSUED
	MONTHS	NEAREST TO FILING DATE
A.TOTAL NO. COPIES (Net Press Run)	450	450
B.PAID AND/OR REQUESTED CIRCULATION		
 Sales through dealers and carriers, street vendors, 	65	80
counter sales, and paid electronic copies.	<i>W</i> 2	00
Mail Subscription (Paid and or requested)	291	286
C.TOTAL PAID AND/OR REQUESTED CIRCULATION		to t
(Sum of 9B1 and 9B2)	356	366
D.FREE DISTRIBUTION		
1. BY MAIL, CARRIER OR OTHER MEANS	U	0
2. SAMPLES, COMPLIMENTARY AND OTHER FREE	43	42
COPIES	100	1/00
E. TOTAL DISTRIBUTION (Sum of C, D1 and D2)	399	409
F. COPIES NOT DISTRIBUTED	51	41
1. Office use, left over, unaccounted, spoiled after printing		
2. Return from News Agents	1100	1/20
G.TOTAL (Sum of E, F1 and F2 – Should equal net press run shown in A)	450	450
Statement must be signed by Publisher, Business Manager, or Owner in the presence of a Notary Public		
I swear that the statements made by me are true, correct, and complete:		
Linda a Dehremichen Rublisher		
(Signature)OFF	(Title)	
(Signature) -		
Sworn to before me this 29 day of Sept, 20 14		
State of South Pakota Mayorie M. Heff Notary Public Notary Public		
County of Bruskings 7 Notary Public		
My commission expires: Quaust 18, 2015		
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Form: SOS REC 051 8/2014